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AD-A207 343

THE ARMY'S ROLE IN THE WAR ON DRUGS

BY

LIEUTENANT COLONEL JOHNNIE R. GOOCH

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SECURITY CLASSIFICATION OF THIS PAGE (When Data Entered)

REPORT DOCUMENTATION PAGE		READ INSTRUCTIONS BEFORE COMPLETING FORM
1. REPORT NUMBER	2. GOVT ACCESSION NO.	3. RECIPIENT'S CATALOG NUMBER
4. TITLE (and Subtitle) The Army's Role in the War on Drugs		5. TYPE OF REPORT & PERIOD COVERED Individual
7. AUTHOR(s) Johnnie R. Gooch, LTC		6. PERFORMING ORG. REPORT NUMBER
9. PERFORMING ORGANIZATION NAME AND ADDRESS U.S. Army War College Carlisle Barracks, PA 17013-5050		8. CONTRACT OR GRANT NUMBER(s)
11. CONTROLLING OFFICE NAME AND ADDRESS		10. PROGRAM ELEMENT, PROJECT, TASK AREA & WORK UNIT NUMBERS
12. REPORT DATE 1 Apr 89		13. NUMBER OF PAGES 40
14. MONITORING AGENCY NAME & ADDRESS (if different from Controlling Office)		15. SECURITY CLASS. (of this report) UNCLAS
16. DISTRIBUTION STATEMENT (of this Report) DISTRIBUTION STATEMENT A: Approved for public release; distribution is unlimited.		15a. DECLASSIFICATION/DOWNGRADING SCHEDULE
17. DISTRIBUTION STATEMENT (of the abstract entered in Block 20, if different from Report)		
18. SUPPLEMENTARY NOTES		
19. KEY WORDS (Continue on reverse side if necessary and identify by block number)		
20. ABSTRACT (Continue on reverse side if necessary and identify by block number) Drug use continues to become more prevalent throughout our country. Its use cuts across all economic, social, geographical, racial, and other aspects of our society. Governments at all levels are becoming increasingly aware of the growing involvement in drug use by their citizens. Many are unsure of how to solve the problem or how to attack it. The Army has been involved in curbing and controlling drug use within its forces for several years. This paper reviews the Army's program in curbing substance consumption		

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and outlines ways other governmental agencies and civilian entities may decrease illegal drug usage within their domains.

USAWC MILITARY STUDIES PROGRAM PAPER

THE ARMY'S ROLE IN THE WAR ON DRUGS
AN INDIVIDUAL STUDY PROJECT

by

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1 April 1989

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FORMAT: Individual Study Project

DATE: 1 April 1989 PAGES: 37 CLASSIFICATION: Unclassified

Drug use continues to become more prevalent throughout our country. Its use cuts across all economic, social, geographical, racial, and other aspects of our society. Governments at all levels are becoming increasingly aware of the growing involvement in drug use by their citizens. Many are unsure of how to solve the problem or how to attack it. The Army has been involved in curbing and controlling drug use within its forces for several years. This paper reviews the Army's program in curbing substance consumption and outlines ways other governmental agencies and civilian entities may decrease illegal drug usage within their domains.

*Keywords: Law enforcement; drug abuse;
drug trafficking; smuggling; (K+)*



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THE ARMY'S ROLE IN THE WAR ON DRUGS

CHAPTER I

INTRODUCTION

As we enter the final decade of this century, our nation is confronting an increasingly perplexing problem with both critical domestic and foreign implications: traffic and widespread consumption of illegal drugs. In fact, our national leaders commonly speak of a "war on drugs." Accordingly, we have witnessed more and more pressure to employ our greatest national resources to combat drug trafficking and use. So both our educational and military capabilities have been cited as potentially powerful strategic resources in this war on drugs. How, in fact, might the U.S. Army enable the nation to reduce drug use and drug traffic?

As a soldier in Vietnam in the early Seventies, I was certainly aware that this national problem was also an Army problem. For in a democratic society, especially one that uses the military draft, the armed forces in many ways reflect the larger society they serve--for better or for worse. So as the war in Vietnam became less and less popular at home and as the Army in Vietnam was manned more and more with reluctant draftees, the drug problem became the Army's drug problem in Vietnam. There these unwilling and largely unsupported soldiers availed themselves, in large numbers, of the abundant, inexpensive supply of drugs--especially marijuana and heroin. Perhaps they sought

escape from an onerous, perplexing duty they did not want to carry out.

At any rate, the Army took positive steps to alleviate the situation. The program was simple: Contain the problem. So soldiers who had completed their tours of duty were tested for drugs. If they tested positively on urine samples, they were detained in Vietnam until they were theoretically detoxified. Of course, the Army quickly detected such subterfuges as soldiers providing false samples from containers strapped to their bodies. Nonetheless, in 1971 DOD directive 1010.1 authorized the Biochemical Testing program, which was implemented primarily on out-going troops through urine samples. This testing indicated with high specificity use of such drugs as amphetamines, barbiturates, opiates, methaqualone, phencyclidine, cannabis, and cocaine--even if they were taken into the soldiers' bodies several days prior to the test.¹ In effect, the program provided an incentive for soldiers to "get clean" in order that they would be able to return to the States without delay.

Perhaps of less concern to the individual soldier but of larger concern to the nation was the Army's program of interdiction. The incredible air traffic within Vietnam and between Vietnam and the States provided enormous opportunities for trafficking indigenous drugs back to the States. So the Army as well took strong measures to eliminate this wholesale traffic by monitoring and interdicting it. Such interdiction then was the second part of the Army's program against drugs as the Vietnam War drew down.

So what the Army regarded as its problem in Vietnam has now been acknowledged as a national problem. U.S. National Security Strategy is currently committed to the anti-drug cause of the Western Hemisphere. This strategy addresses the sources of drug production and the means of transporting drugs into the U.S.-- especially from supplier nations and havens for suppliers in Latin America.² DOD is thus charged with supporting the Presidents plan to combat this drug trafficking.³ Likewise, DOD has announced plans to begin drug testing civilians who occupy positions essential to public safety and national security.⁴

Without doubt, drug trafficking and widespread drug use pose threats to U.S. security socially, economically, and militarily. Drugs could directly degrade our military readiness. As they were to a degree in Vietnam, so also could they become a direct threat to our armed forces themselves.⁵

A moral and social problem has thus developed to the point of being a security problem. This paper will explore the Army's experiences in dealing with drugs and propose ways the Army may be employed, either as an institutional model or as an instrument of governmental power and the authority, in the war against drugs.

ENDNOTES

1. U.S. Department of the Army, Army Regulation 600-85, p. 4.
2. National Security Strategy of the United States, January 1988, p. 26.
3. Frank Carlucci, Report of Secretary of Defense to the Congress on the Amended FY 1988/FY 1989 Biennial Budget, p. 79.
4. Ibid., p. 289.
5. The Joint Staff, United States Military Posture for FY 1989, p. 100.

CHAPTER II

BACKGROUND

Casual reading of daily newspapers in the U.S. reveals indisputably the magnitude of the drug problem. Certainly the tremendous profits available for dealing in large quantities of drugs attracts many unscrupulous "entrepreneurs" into this illegal business. So recent legislation has been aimed at these "kingpins" of drug trafficking. Recently in New Jersey, a 54 year-old Colombian woman became the first person convicted under such legislation.¹ She was fined four million dollars and sentenced to life in prison. But how much of a deterrent is such a prosecution? Given the extreme difficulty of obtaining such convictions and the enormous profits available for large-scale drug transactions, it appears that there will be no shortage of capable, greedy individuals willing to take such risks. In fact, how stringent is a four million dollar fine against an individual engaged in a million-dollar-a-week, tax-free business? Or how long will a person sentenced to life imprisonment in fact remain in prison? Greed is a powerful motivator. As long as tremendous profits are available, dealers will crop up to satisfy a seemingly insatiable demand for drugs.

In addition to the kingpin legislation, the U.S. has sought to interdict the supply of drugs at its sources. Bolivia, an

impoverished South American country of 6.7 million people, produces about one-third of the cocaine used in the U.S. and Europe. In cooperation with the U.S. Drug Enforcement Administration, Bolivian officials have assisted in destroying Bolivian cocaine labs, where raw cocoa is processed into cocaine paste. One destroyed lab produced over 3.5 tons of pure cocaine per week. A top Bolivian general was convicted of protecting this clandestine operation and dismissed from the Bolivian Army.² But such dramatic, short-term efforts do not address the root economic causes of such countries' quest for the quick, easy drug dollars. Can we in fact reasonably expect impoverished provider nations to eliminate a primary source of national income? Despite such operations as the one in Bolivia, drugs continue to flow into the U.S. at a very high volume.

During a recent trip to New York City, U.S. Army War College students heard three high-ranking public officials speak about the drug problem. The chief of the Northeast Region of the Drug Enforcement Administration focused on a strategy of interdiction. He admitted that our Armed Forces could assist in "sealing" both our borders and our skies. Such interdiction would surely slow down drug traffic, but he indicated it would not stop such traffic. He noted further that 16 of 20 illegal drugs in use in the U.S. are in fact made in the U.S. So he advocated concentrating on changing users' and the general public's attitudes toward drugs as a better expedient in combatting drug use than attempting to interdict the flow of drugs into the country. He advocated strict enforcement of laws against drug

use as well as against drug trafficking. He urged public treatment of drug users in programs that indeed turn them off drugs. Finally, he advocated a preventive program to keep non-users away from drugs.³

The Mayor of New York City welcomed more federal involvement in interdiction of the drug supply. He also sought use of federal facilities to relieve local and state prisons overcrowded with drug offenders.⁴

New York's Police Commissioner oversees a force of 40,000 policemen--the world's largest police force. He sees drug use and drug trafficking as his greatest problem. He would welcome assistance in dealing with it from the military. But he also noted that until the demand for drugs decreases, the crisis will be with us.⁵

So leaders from all parts of our society acknowledge the magnitude of the drug problem. They agree that this problem threatens nearly all people--and that it threatens entire communities and in fact our society at large. They want to make war on drugs, and they know how important it is to win this war. But they do not all agree on the best strategy for conducting the war. Some would concentrate on the supply, others on interdicting the flow of drugs, others on reducing or eliminating the demand, and still others on some combination of these efforts. In fact, total elimination of supply, complete interdiction of the flow of drugs, or total reduction of demand--any one of these absolute strategies would solve the problem. Yet neither of the three options is attainable in the short

term. Rather, we must work cooperatively to turn the tide of battle: discourage suppliers, harass drug runners, and educate and reform drug users or potential users. The war will be won by degree, not by an absolutely decisive battle.

ENDNOTES

1. "Columbian Convicted Under Drug Statute," New York Times, 29 November 1988, p. II, 4:1.
2. "General Discharged in Drug Case," Washington Post, 9 October 1988, p. A34e.
3. John Stutzman, Fighting the Drug War, cited with special permission of Mr. Stutzman.
4. "Federalize the Drug War," The Jewish Press, 15 July 1988, p. 80.
5. Francis Hall, Military Involvement in the American Drug Crisis, New York City Police Department, p. 7.

CHAPTER III

SUPPLY

We have noted U.S. concerns about Latin American drug suppliers and traffickers. But we should as well concern ourselves with the global nature of drug supply. Suppose we in fact eliminated the supply of drugs from South America. Wouldn't we be pretty much in the position of the little Dutch boy who plugged a hole in the dike with one arm? Holes and potential holes are everywhere, especially when ready capital causes the tidal wave of drugs to raise anywhere. In fact, high-demand drugs may come from Hong Kong, Turkey, Thailand, Peru, Bolivia, or Panama--to name just a few globally dispersed sources. Likewise, they may be shipped either directly or indirectly into the U.S., so in effect non-growing countries may, as intermediaries, themselves become suppliers.

And we have not even taken into account that many drugs may be grown within our own national borders--often on federal land itself. Further, we must acknowledge that not all addictive, harmful drugs come directly from natural sources.¹ We are increasingly faced with the problem of "designer drugs" like crystal: These drugs can be manufactured from laboratory processing of legal, cheap combinations of readily available chemicals.

The previously mentioned cooperative effort against the Bolivian drug supply is instructive. USSOUTHCOM aviation units transported agents of the U.S. Drug Enforcement Administration into Bolivia, a very productive source of the U.S. and world supply of drugs. With the assistance of cooperating Bolivian officials, this operation succeeded in destroying several cocaine laboratories. Since the leaves could no longer be processed, in-country prices for cocoa leaves fell from \$1.25 per pound to 15 cents a pound, which meant that growers suffered an immediate loss of around 20 cents a pound. Also during this 60-day operation, some 800 drug traffickers fled Bolivia. This was the first major military-assisted operation for the U.S. Others have followed. But despite short-term success in reducing the Bolivian supply of cocaine, the operation had no real effect on cocaine use in the U.S.²

Even if the U.S. had the resources to expand and sustain such operations, it is doubtful that such actions could in themselves eliminate, or even substantially reduce, the supply of illegal drugs in the U.S. The following are reasons for doubting the potential of significant reduction of drug supplies from sources from outside the U.S.:

1. Social and economic circumstances: Cocoa farming is a centuries-old activity in some countries, deeply embedded into the culture.³ Just as tobacco farming is almost a "part of Southern life" in the U.S., so also is cocoa farming part of life in other countries. It's the way they make their living; it's the way they use land resources; it's a livelihood; they see

nothing wrong with doing it. Taking it away, making it illegal would be little different from shutting down the Jack Daniel's Distillery in Lynchburg, Tennessee, and telling its corn suppliers and barrel-makers to take their goods elsewhere.

2. Political circumstances: For diplomatic reasons, top officials of supplier countries may agree to assist the U.S. in eliminating indigenous drug supply.⁴ But if such decisions were not politically popular in the supplier country, then the policy of cooperation would amount to little more than a "front." As we learned in Vietnam, if we create a puppet government in accord with our policies, that government may in fact have little other function or reason for existence than to get along with-- and accept aid from--the U.S.

Even if such cooperation is genuine and widely supported, it may have unforeseen effects to the disadvantage of the supplier country. For example, if our agents in cooperation with a local foreign police force closed dirt airstrips used for drug trafficking, this could result in the traffickers moving their shipping operations to a commercial airport which may cause additional security problems and disruption of flight schedules. So a supplier country's cooperation in fact may jeopardize its legitimate economy.

So even though some authorities advocate that we attempt to stop the flow of foreign drugs into the U.S. right at the source, closer investigation of this strategy reveals that doing this is not so easy. Of course, the U.S. could take, or impose, a more active role in destroying drug crops and manufacturing facilities

in supplier nations--especially those that are uncooperative or ineffective in doing these things themselves. But increased U.S. aggressiveness could lead to other problems--charges of human rights violations; of disrupting foreign economies; or of creating puppet governments to serve U.S. policies, not to serve the larger needs of the host population. Such intrusion could be, to say the least, undiplomatic and disruptive of total foreign policy.

As in Vietnam, in the war on drugs the U.S. is attempting to fight an elusive, often unidentifiable adversary supported by logistics and safe havens lying across international borders. Likewise, the U.S. seems to have no effective overall strategy or concerted tactics to carry out this war. For example, one source indicates that many authorities believe our strategy should be based on stopping the supply; others state that concentrating on reducing demand is the proper course of action.⁵ It appears, then, that even our authorities cannot get a good "fix" on the causes and solutions of the problem.

Even so, almost all analysts agree that the U.S. cannot win the war on drugs by concentrating solely on eliminating the foreign supply of drugs. We cannot exercise sufficient control within supplier countries to completely stop growth and manufacture of these drugs. At best, we might be able to stem the supply significantly. Slowing down the supply of drugs may help win the war. But other means are necessary if we plan on a total victory in this complex war.

ENDNOTES

1. Francis Hall, Military Involvement in the American Drug Crisis, New York City Police Department, p. 6.
2. Michael H. Abbot, "The Army and the Drug War: Politics or National Security," Parameters, December 1988, p. 103.
3. Peter Reuter, "Eternal Hope: America's International Narcotics Efforts," The Rand Corporation, February 1985, p. 6.
4. "The International Drug Problem and U.S. Foreign Policy," Department of State Bulletin, September 1988, p. 7.
5. "Getting Tough on Cocaine," Newsweek, 28 November 1988, p. 76.

CHAPTER IV

INTERDICTION

After drug crops have been harvested and perhaps processed in foreign countries, obviously they must be transported into the U.S. in order to be marketed and consumed here. The strategy of interdiction is designed to interrupt this flow of drugs at some time and place between the supplier country and the U.S. user population. A most logical point of interception, of course, is at our national borders. So for several years the U.S. military forces have offered some assistance to law enforcement officials in carrying out this strategy of interdiction. The levels of this military assistance have been determined by such considerations as the availability of military resources, priorities of national security, and the impact on readiness of military units to be deployed in the war on drugs. In the past four years, considerable military flying time has been devoted to interdiction.¹ (See Fig. 1) Likewise, the DOD has authorized the loan of military equipment for the same purpose.² (See Fig. 2 for FY87 loan data)

Despite such support from the military, the international drug trade continues to flourish. CIA estimates verify a high rate of drug traffic from South America, especially of cocoa products.³ Record seizures of cocaine in 1987 came at a time

Military Aircraft Surveillance Missions in Support of Drug Interdiction

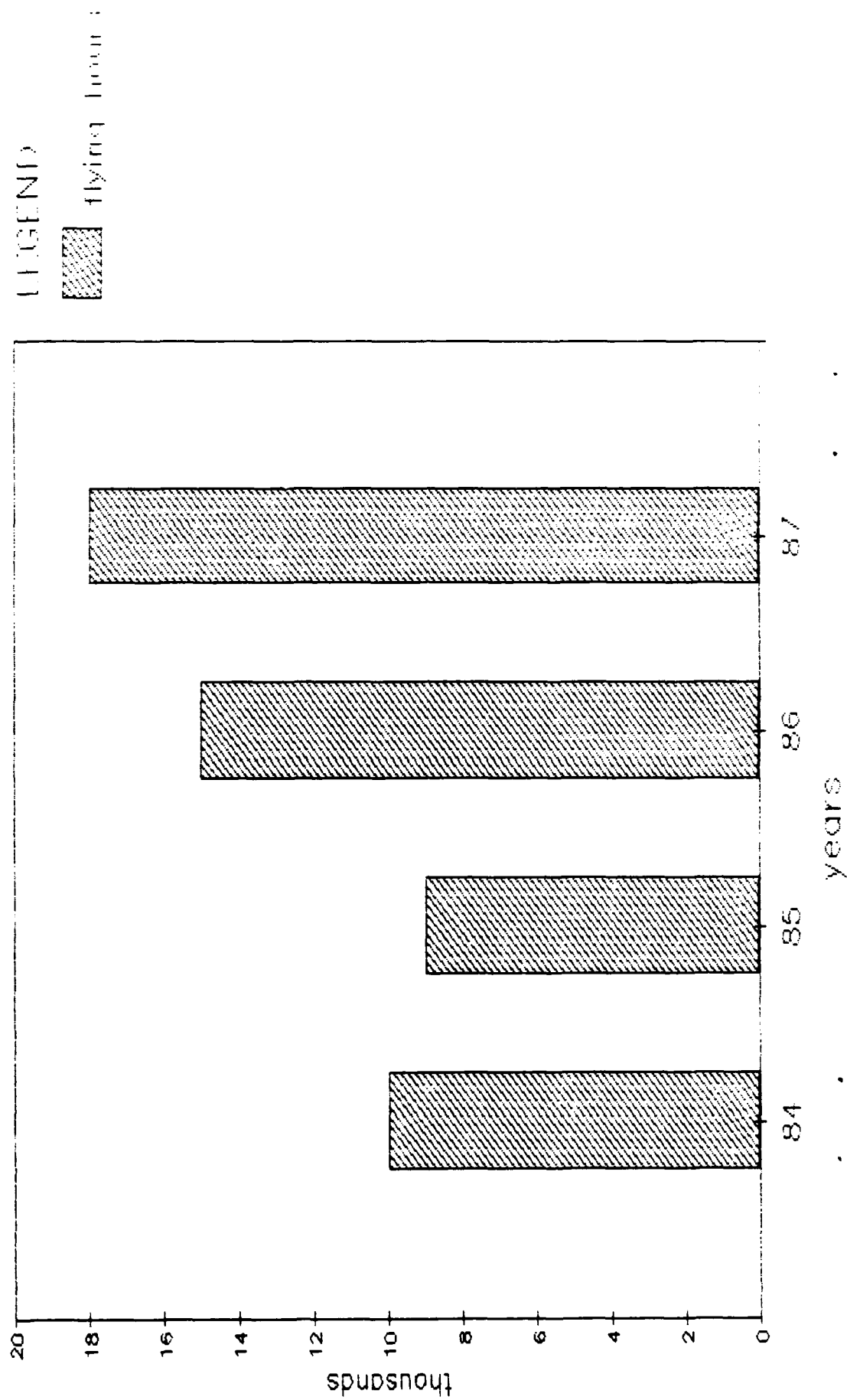


Fig. 1
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DOD EQUIPMENT ON LOAN/PROCURED FOR DRUG LAW ENFORCEMENT
AUTHORITIES (FY1987)

(in millions of dollars)

AIRCRAFT

4	P3As	52.4
4	E2C	180.0
12	UH-60	55.2
6	C-12	5.7
16	OH-6A	2.2
6	UH-1H	<u>5.5</u>

Aircraft Total 301.0M

COMMUNICATIONS EQUIPMENT

90	Vinson Secure Radios	.315
25	Parkhill Secure Radios	.045
12	Motorola, Hand MX350	.018
6	AN/PRC-25 Radios	<u>.087</u>

Communications Total .465M

MISCELLANEOUS

3	Aviation Test Sets	.036
4	Battery Chargers, P7382	.009
40	NV Sight, AN/PAS 7A	.671
250	Mask Chemical M17	.023
67	NV Goggles, AN/PVS-5	.301
8	NV Sight, AN/VAS-11	.366
8	NV Sight, AN/PVS-2	.015
34	PEWS Sensor, AN/TRS-2	<u>.282</u>

Miscellaneous Total 1.703M

WEAPONS

1,116	M-14s	.154
6	Grenade Launchers M79	<u>.004</u>

Weapons Total .158M

ENGINEERING EQUIPMENT

1	Engine, 5 ton	.012
6	Generator Sets, 10KW	.036
12	Net Cargo, Aerial Delivery	.009
12	Slings Aerial Del.	.008
1	Truck, M49AC	<u>.065</u>

Engineering Equipment Total .130M

COMBINED TOTAL \$303.500M

when more and cheaper cocaine was available than ever before. In fact, increased interdiction may simply lead to increased production and a higher volume of traffic.⁴ (See Fig. 3)

U.S. laws, particularly the Posse Comitatus Act of 1878, strictly delimits the use of military forces in civilian law enforcement. This law was modified, however, in 1981 to allow for greater use of the military in the war on drugs. The new law authorizes use of military equipment and facilities in civilian law enforcement. It authorizes as well use of military personnel to operate such equipment and to conduct surveillance operations but military personnel cannot conduct search and seizure or make arrests.⁵ This does not pertain to the U.S. Coast Guard which is authorized to search, seize, and make arrests.⁶ Further, DOD policy indicates that use of military equipment and personnel must not detract from readiness. In fact, this latter restriction is probably the most critical limitation on use of the military in the war on drugs.⁷ Even so, as the public demands more effective, concerted action on drug traffic and our national leadership becomes more committed to winning the war on drugs, without doubt the military will be called on to contribute more support, especially in the strategy of interdiction.

In fact, some members of Congress have already advocated that we seal off our national borders, especially to the South. Some estimates indicate that it would require at least 90 infantry battalions simply to seal off the Mexican border.⁸ Even in the short term, such a demand for military personnel is not feasible. But Congress allocated 300 million dollars for

Estimated Cocaine Production and Interdiction

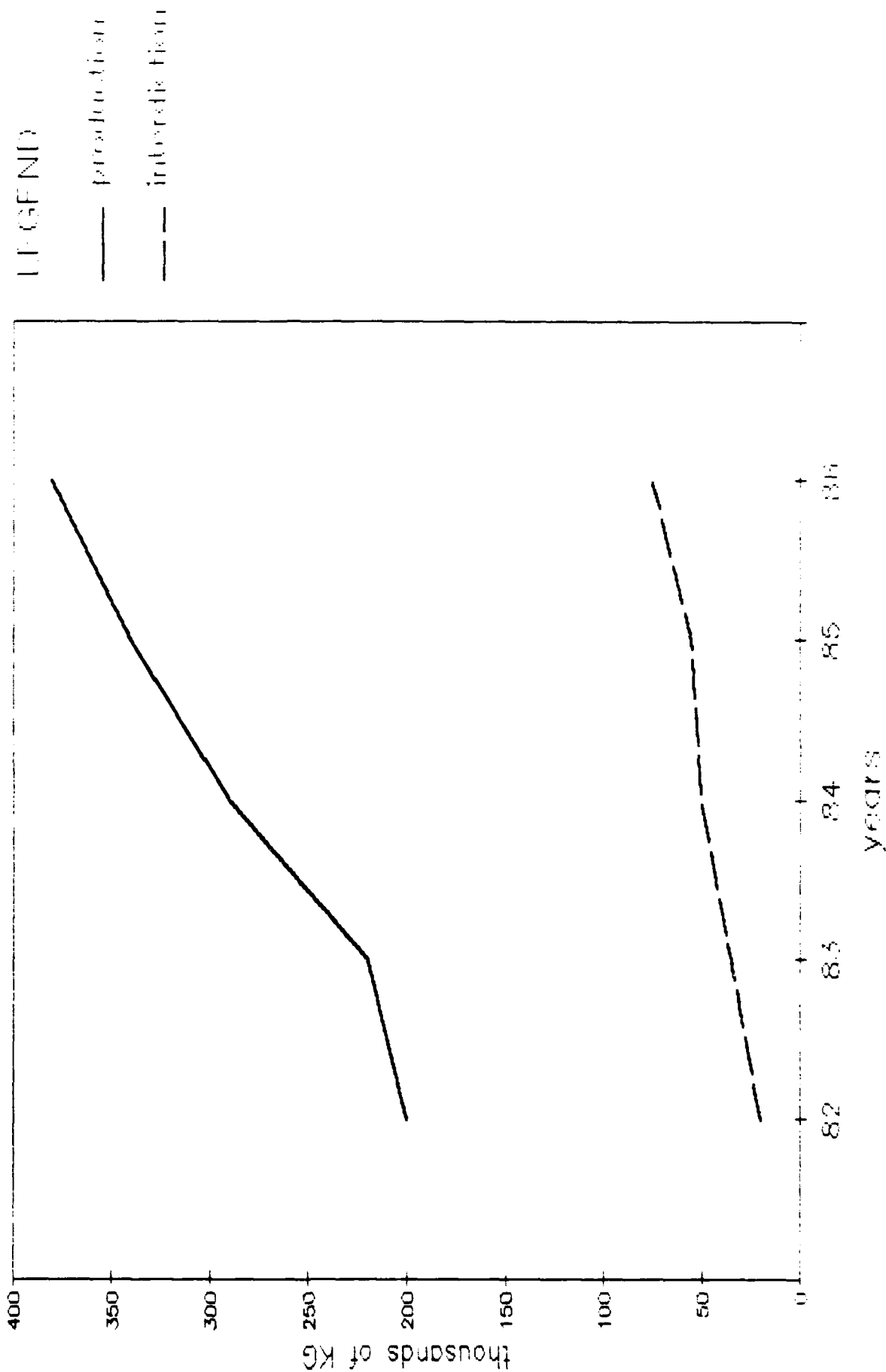


Fig. 3
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FY89 to support operational costs of DOD assets for drug interdiction. Forty million dollars of this allocation was set aside for use of National Guard and Reserve Component units in interdiction activities.⁹ But Congress did not further specify how this allocation should be used; in fact, detailed planning has become a DOD responsibility.

National Guard helicopters and other air units will be deployed for interdiction. So also will other military police and intelligence units. DOD planning indicates that all states should plan drug interdiction missions for their Guard units. Then the National Guard Bureau will review and prioritize these missions and allocate funds accordingly. The Bureau's recommendations will then be reviewed by the Assistant Secretary of Defense for Reserve Affairs. Following DOD staffing and review by the Attorney General, the Secretary of Defense will make final approval of Guard missions for interdiction. Following such approval, the National Guard Bureau will then allocate funds and authorize the missions. Forty five states had submitted mission plans by 8 January 1989.¹⁰ So recent legislation authorizes the National Guard to assume an active role in "directly fighting the drug traffic." Further, the Guard--unlike the Active Component--has no restrictions under the Posse Comitatus Act and is authorized by law to conduct search and seizure and make arrests.¹¹ Thus recent legislation and congressional allocations have established that the National Guard now has the mission of fighting drug traffic.

Here are some missions requested by given states, currently

going through the review process:¹²

California--Twenty-four Guard helicopters with special surveillance equipment will patrol the 130-mile Mexican border from sun-down to sun-up. Helicopter crews will call local police to arrest suspected smugglers.

Florida--Guard members will assist customs agents in inspecting ships arriving in the ports of Miami, Tampa, and Fort Lauderdale. Helicopters will maintain surveillance of landing strips used by suspected drug runners. Guardsmen will only assist law enforcement officials, but Guardsmen will not conduct search and seizure or make arrests.

Texas--Guardsmen will inspect commercial vehicles entering the U.S. Guard helicopters will search for marijuana farms in Texas and provide information to local law authorities.

We see, then, that DOD resources are being increasingly called upon for active use in the war on drugs. In fact, the National Guard's role is becoming more precisely defined and specifically funded. The military role in interdiction of the drug traffic, especially from the South, is increasing. But just as we cannot expect to totally stop the growth and production of drugs at their foreign sources, neither should we expect to stop completely the flow of drugs into the country at our borders. Our resources are severely limited. Our borders are incredibly extensive and infinitely vulnerable to smuggling. Our "good neighbor" traditions have permitted virtually a free flow of tourist and commercial traffic into the U.S. Surely we can slow the rate of drug traffic. Likewise, we can, perhaps

dramatically, increase the risks and price of detection of this traffic. But we simply cannot expect to bring it to a complete halt.

ENDNOTES

1. The Joint Staff, United States Military Posture for FY 1989, p. 100.
2. "Current DOD assistance to civilian law enforcement," Deputy Assistant Secretary of Defense for Drug Policy and Enforcement, 9 May 1988, p. 7.
3. The Joint Staff, United States Military Posture for 1989, p. 101.
4. Ibid., p. 101.
5. Michael H. Abbot, "The Army and the Drug War: Politics or National Security," Parameters, December 1988, p. 100.
6. "U.S. Coast Guard Drug Interdiction Mission," Coast Guard Headquarters, Washington, D.C., 24 October 1986, p. A18.
7. Abbot, p. 100.
8. "Pentagon Warns of a No-Win Mission," The Washington Post, 13 May 1988, p. A4.
9. U.S. Congress, Department of Defense Appropriation for 1989, 28 September 1988, p. H8526.
10. Report to Congress by Department of Defense, January 1989, p. 8.
11. Ibid., p. 7.
12. "Role in Drug War for National Guard," New York Times, 8 January 1989, p. 1.

CHAPTER V

DEMAND

We have explored the current use and proposed use of military assets in reducing the supply and stemming the flow of foreign drugs into the U.S. But the potentially most effective means of winning the war on drugs is to significantly reduce or even totally eliminate the demand for illegal drugs. In this matter, the military can best serve as a role model. Over the past two decades following the war in Vietnam, the military has successfully curtailed drug consumption in the active armed forces. This effort has been carried out through two means: Detection and treatment of drug users and preventive drug education to persuade non-users to maintain their abstinence. Both means have been supported by a policy of non-tolerance of drug use, based on simple motivation: If a person wants to remain active in the military, that person must cease and desist from drug use.¹ The program has unquestionably succeeded.² (See Fig. 4 for Army statistics over the past six years) Nearly all soldiers are tested for drugs at least once annually. More frequent testing is required when there is reasonable suspicion that a soldier is using drugs. Those who test positive are counseled and put into rigorous drug education programs. More rigid rehabilitation programs are required of heavy users.

Army Drug Testing Percent of Soldiers Testing Positive for Drug Use

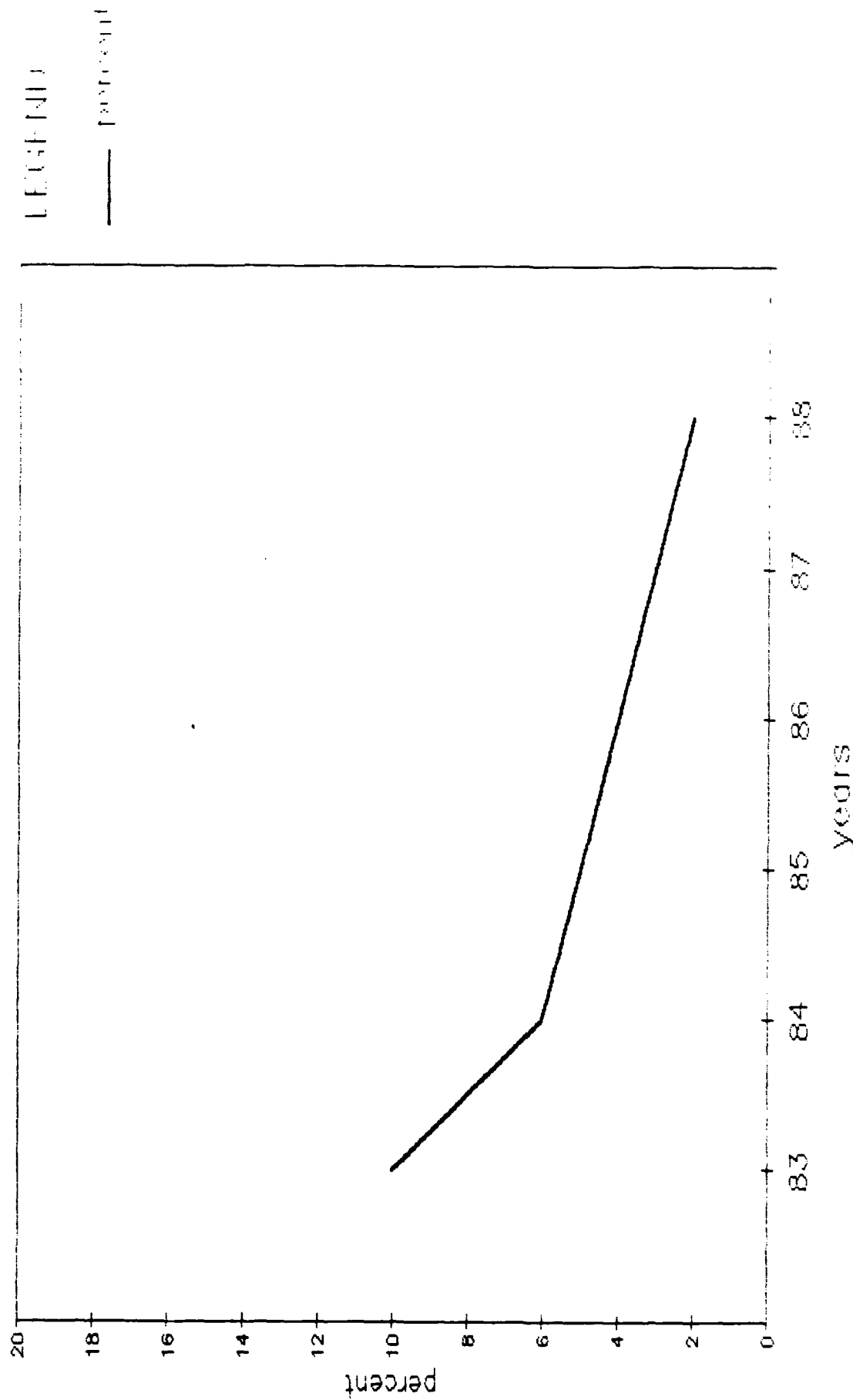


Fig. 4
25

Incorrigible users are separated from the service.

However, because we live in a free and democratic society and because few institutions in our society have the command and control mechanisms inherent in military organizations, we cannot assume that society at large can take the kinds of measures the military has taken to eliminate the demand for drugs. Even so, President Reagan ordered that four million transportation employees be subject to random drug testing.³ Likewise, college athletic programs have adopted drug testing as a means of keeping athletes clean. Such programs are based on rationale of individual health and public safety.

So we have the means to eliminate drug use in highly institutionalized settings. How widely these means should be employed is a bottom-line political question: What price to our freedoms are we as a society willing to pay especially to detect and rehabilitate drug users?

On the other hand, we should surely attempt to assess the success of educational efforts to discourage drug use. That is, is the military policy of detection of drug users in fact the primary deterrent of drug use in the military? Or is the military drug education program an equally effective, or more effective, deterrent? Likewise, how influential is the system of rewards as a drug deterrent? Since the military can provide the incentive of continued active service--with its security, pay, and promotions--to non-users and reformed users, how significant is this reward as a deterrent? If education and a system of rewards for non-users are indeed effective deterrents, then the

military model seems more viable, for these means do not run counter to our traditions of freedom and democracy. Whatever the answers to these questions, without doubt the military has been able to nearly eliminate the demand for drugs among its active forces. Once that has been accomplished, the strategies of elimination of supply and interdiction of the flow of drugs become moot.

ENDNOTES

1. Interview with Dr. Donna Smith, Department of the Army Office of the Deputy Chief of Staff for Personnel, Washington, D.C., 16 November 1988.

2. "Army Drug Testing," Briefing Slide, Department of the Army Office of the Deputy Chief of Staff for Personnel, 1 October 1988.

3. "U.S. Transportation Chief Defends Drug Testing Rule," Harrisburg Patriot News, 16 November 1988, p. B2.

CHAPTER VI

TRANSFER OF DOD FACILITIES

In addition to technology and limited use of personnel, DOD can assist in the war on drugs by making archaic, unused, or unnecessary physical facilities available for the treatment or detention of drug users and traffickers. In any war, mobilization of all available resources is essential for victory. Even in a low-intensity conflict, a centralized, concerted effort should be undertaken to make as many resources as possible available to the commanders fighting the war--especially resources that have little other value.

The complexity of DOD operations, the vastness of DOD holdings, and the political parochialism through which unneeded facilities are kept open have all contributed to some surplus of facilities within the military establishment. These facilities could be, sometimes at little cost, converted to minimum-security detention centers for convicted drug traffickers and criminally habitual users who have been convicted of drug-related crimes. Detaining traffickers at least takes them temporarily out of active drug dealing, and it may as well serve to deter other potential traffickers. So such detention supports efforts to interdict the drug traffic. Likewise, other facilities may be converted into drug rehabilitation centers. If such centers

develop effective rehabilitation programs and if there is sufficient access to such programs, many users--unable to help themselves, but perhaps desperate to get drugs out of their lives--may voluntarily enter them or, more likely, be referred to them from overburdened counseling programs handicapped by lack of resources and by proximity to the flow of drugs. Successful rehabilitation, demonstrated through low rates of relapse can in fact decrease the demand for drugs and convert the social liability of users into the social asset of productive, tax-paying citizens. Some DOD facilities, then, should be identified for detention and rehabilitation centers and converted as soon as possible to such uses.

In fact, DOD has entered into an agreement with the U.S. Department of Health and Human Services to initiate a partnership linking federal personnel, facilities, and other resources to combat drug abuse and to treat victims of drugs.¹ Further, the recently established Commission on Alternative Utilization of Military Facilities is required to give six-month reports to Congress and the President, which would cite the following information:²

1. Military facilities identified by the Secretary of Defense as ready for closure, underutilized (wholly or partially), or excessive of defense needs.
2. Military facilities which could be effectively used or renovated to serve as medium-security detention centers for non-violent prisoners.
3. Military facilities (or parts of facilities) which

could be effectively used or renovated to serve as drug-treatment centers for non-violent drug users.

Although there is considerable controversy about the value of jailing drug abusers, the high cost of jailing and overcrowding of our prison systems has in fact precluded imprisonment of large numbers of abusers.³ Even so, there is increasing pressure to reduce demand by penalizing users, rather than simply directing legal resources at suppliers. So DOD facilities provide a ready means of inexpensively expanding our capacity to detain criminal users. So also could our rehabilitative agencies and programs. These expanded resources, if properly used, could serve to reduce both the flow of drugs in our society and the demand for them.

ENDNOTES

1. William H. Taft, U.S. Department of Defense, Memorandum of Understanding, 28 October 1988.

2. U.S. Congress, Senate, Department of Defense Appropriation for 1989, 28 September 1988, S. Rept 2852.

3. "Getting Tough on Cocaine," Newsweek, 28 November 1988, p. 77.

CHAPTER VII

CONCLUSION

Without doubt, the drug problem in the U.S. has reached epidemic proportions. As a national problem with definite international dimensions, it threatens our national welfare and indeed our national security. So it is not unrealistic to say that, to combat the problem, the nation is going to "war on drugs." Unlike in other wars, however, the nature of this war--which may best be viewed as a low-intensity conflict--is such that the military may not plan the war's strategy or even play a central role in fighting the war. Even so, military wherewithal and resources will contribute to the outcome of the war on drugs.

Currently, there is no clear strategy on how to employ the military in the war on drugs. In fact, the DOD has been placed in the unusual position of having to provide plans for a war for which it does not have total responsibility. This war is being fought on three fronts (supply, interdiction, and demand) at varying levels of intensity. The Army has already constructively contributed to efforts to eliminate the drug supply in South America. Even so, it seems doubtful that such limited efforts have curtailed the drug supply to the U.S. or to the world at large.

Recent efforts to interdict the flow of drugs into the U.S.

have included uses of military equipment and personnel (most from the Reserve Component) to assist civilian law enforcement officials, both at the state and federal levels, in seizing drug shipments at our borders and, whenever possible, in arresting and convicting the smugglers. A recent 40 million dollar Congressional allocation in support of increased military activity on the interdiction front indicates that the military, and especially the National Guard, may be more widely used on this front. Such efforts should reduce the foreign drug flow into the U.S. and substantially increase both the risks and expenses of smugglers.

On the demand front, the Army has proven that it can keep its own house clean of drugs, especially through routine, mandatory drug-testing. Further, the determination of commanders to rid the military workplace of drugs has supported this testing program. And even though the Army does remove habitual, incorrigible users from the ranks, it provides rehabilitation programs to reform users who have the potential to serve productively. Most of all, the Army value-system decries drug use and enhances abstention from using drugs. So in the past twenty years, the Army has developed a large institutional model for eliminating the demand for drugs within the organization. How much value this model has for our society at large really depends on the amount of control and open, democratic society is willing to accept as a trade-off for reducing the demand for drugs.

Non-essential and outmoded military facilities may be used

in the war on drugs. Recent initiatives will enable quick transfer of such facilities, which may be then used as detention and rehabilitation centers for drug traffickers and drug users.

In actuality, our nation's war on drugs is just getting underway. The Army has already made some contributions to the war. It is preparing to do more. But neither the Army's total mission nor the Army's resources indicate that the Army will play a central role in the war on drugs. On the other hand, the Army should contribute all it can insofar as such contributions do not detract from its readiness to carry out more essential missions and to carry out more specifically military tasks for which the Army has been organized and equipped.

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4. "Columbian Convicted Under Drug Statute." New York Times, 29 November 1988, p. II, 4:1.
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